

Emergency Medical Technician Program Application Winter 2017 Forms Packet

FORM 1 CONDITIONS FOR APPLICATION

Complete all portions of this form as directed. List name as indicated in myLane

L#	FIRST	LAST	
E-mail - required _			Phone

All courses were taken at LCC

Official Transcripts from other colleges have been submitted to Lane Enrollment Services – Attention: HP Transcript – Lane Community College - 4000 East 30th Ave, Eugene, OR 97405

Application Conditions and Program Progression Completion Requirements

In submitting my EMT Program application by email to <u>HPApplicationCenter@lanecc.edu</u>, I affirm the following:

- I took all of my prerequisite courses or placement tests at Lane Community College,
 OR I have submitted official, sealed transcripts from colleges other than Lane to Lane Enrollment Services.
- I have completed the <u>LCC Credit Admission</u> process and have an L number.
 OR I have previously taken credit classes at Lane and have an L number.
- I have completed the EMT Online Admissions Application & Payment process, including paying the **\$35 non-refundable** application fee.
- I understand all information in the Winter 2017 EMT Application Information Packet. I am NOT considered an applicant to the program unless all required forms and documentation are completed and submitted according to application instructions prior to the application deadline.
- My application will not be returned and I am responsible for making a personal copy.
- I have read the Fall Enrollment Requirement Section and understand I must attend the mandatory orientation and comply with all other enrollment requirements if I am accepted or considered a program alternate.
- I am a current resident of the State of Oregon and my current Oregon address is listed in myLane.
- I hereby attest that all application information and documentation I have submitted in this packet is accurate and authentic.

Be sure to use the latest version of Adobe Reader to complete this form and submit as a fillable pdf form. If this form is submitted scanned, via Google docs, handwritten or delivered in person it will not be accepted. Macintosh users – do not use "Preview" to view or complete this Form. Set Adobe Reader as the default PDF reader.

Submit all supporting documentation attached to ONE e-mail by the deadline: Health Professions Application Center <u>HPApplicationCenter@lanecc.edu</u> Subject: Student Name L Number EMT Application Change file name to: EMTW2017LastNameLNumber	On the same date or before: Lane Transcript and/or submitted transcripts to <u>Enrollment Services</u> reflect courses and degree(s) listed on Point Petition Sheet. Online EMT Program Admissions Application and Payment has been submitted.
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FORM 2 PREREQUISITE SHEET See the EMT Application Information Pac Equivalency & Transfer requirements if co which are completed and are on your officia	Courses <u>must meet</u> minimum credit requirement shown. Grades of C- or higher meet minimum grade criteria.				
Enter information for either the test or course that you are using to meet the Math and Writing Requirement.	Course/School	Term/ Year	# Credits	Indicate Score Earned	Indicate Grade Earned
Item 1: Mathematics Requirement: Only	one option needed.				
Accuplacer Placement Tests: Minimum so Math Course: Must be completed by the en	•	etic & 25 or above	e for Algebra. Must be t	aken March 2016	or later.
Arithmetic Placement Test	Lane Community College		N/A		N/A
DR Elementary Algebra Placement Test	Lane Community College		N/A		N/A
OR College Algebra Placement Test	Lane Community College		N/A		N/A
DR MTH 060, or higher (4/5 Cr)				N/A	
tem 2: Writing Requirement: Only one o	otion needed.				
Accuplacer Placement Tests: Minimum so Writing Course: Must be completed by the	•	aken April 2012 o	r later.		
Accuplacer Reading Comp. Test	Lane Community College		N/A		N/A
DR WR 121, 122, or 123 (3 / 4 Cr)				N/A	
DR Prior Bachelor's degree, must appear on a submitted transcript			N/A	N/A	N/A
tem 3: Additional Requirements.					
Age Requirement: I am or will be 18 by th	Enter Birth Date:				
Academic Performance: You must have	one of the following.				
GED Certificate	Enter Month/Year:				
High School Diploma	Enter Month/Year:				
College Degree (2 or 4 year) awa	Enter Month/Year:				

Be sure to do the Online Application and Payment Process to complete your final step to apply to the EMT Program. List any additional information that didn't fit into spaces provided above: